24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y Y
T	
Full Name of Payee Scott Howell & Company	Date of Public Distribution/Dissemination
Mailing Address 3900 Willow St.	10 21 2016
Suite 200	Amount
City State Zip Code	40910.58
Dallas TX 75226	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media production Category/ Type 004	10 / 21 / 2016
Name of Federal Candidate Support Office	e Sought: X House District: 18
Perkins, Randy, , ,	President Senate State:FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
American Media & Advocacy Group	10 21 2016
Mailing Address 815 Slaters Lane	Amount
000	20050440
City State Zip Code Alexandria VA 22314	208504.19 Transaction ID : 002 Data of Dishumanant or Obligation
Purpose of Expenditure Category/ Category/	Date of Disbursement or Obligation
Media placement Type 004	10 20 2016
	e Sought: House District: 18
Perkins, Randy, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	249414.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	249414.77
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Crosby, Caleb, , , [Electronically Filed] Date 1	0 22 2016
Signature	